DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION			Attorney D	ocket Number	INT-96
			First Name	ed Inventor	Gupta et al.
			COMPLETE IF KNOWN		
	7 CFR 1.63)  ith Declaration Submitted OR Initial Filing (Surcharg		Application	Number	
Declaration Submitted w Initial Filing			Filing Date	<b>!</b>	
	(37 CFR 1.16(i		Group Art	Unit	
			Examiner I	Vame	
As a below named invent	or, I hereby declare th	at:			
My residence, mailing addr I believe I am the original, f plural names are listed belo entitled:	irst and sole inventor (if	only one nam	e is listed be	low) or an origin:	al, first and joint inventor (if sought on the invention
МЕ	ETHOD FOR MANUFAC	CTURING MUI (Title of the In		PHTHALMIC LE	NSES
the specification of which				***************************************	
is attached hereto					
OR					
was filed on (MM/DD/Y	YYY) as United ded on (MM/DD/YYYY)	States Applica	ation Number	r or PCT Internat	ional Application Number
I hereby state that I have reamended by any amendment	viewed and understand at specifically referred to	the contents of above.	of the above	identified specific	cation, including the claims, as
and the national or PC1 inte	ions, material information in the material information of the material information of the material information in	on which becar he continuation	me available n-in-part app	between the filing lication.	g date of the prior application
priority is claimed.	(a) of any PCT internation sted below and have also	onal applicatio o identified be plication havin	n which desi low, by chec g a filing dat	gnated at least o king the box, any e before that of t	ne country other than the
Prior Foreign Application Number(s)	Country	Foreign Fi (MM/DD		Priority Not Claimed	Certified Copy Attached? YES NO
	:				

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s)	Filing Date (MM/DD/YYYY)	application(s) listed below.				
		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:						
Application Serial No.	Filing Date	Status				
		Patented Patented Patented				
I hereby appoint:						
☑ Practitioners at Customer Number AND	Place Customer Number Bar Code Label Here					
Practitioner(s) named below:  Name  Registration Number						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
Address all telephone calls to Lois A. Gianneschi at telephone number (732) 524-6351.						
Customer Number  Direct all correspondence to:						
Name:						
Address:						
Address:						
City:	State:	ZIP				
Country	Telephone:	Fax:				

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Amitava		Family Name or Surname Gupta				
Inventor's Signature		· · · · · · · · · · · · · · · · · · ·	Date			
Residence: City Roanoke	State Virginia	Coun	try USA	Citizenship USA		
Mailing Address 5322 Fox Den Road						
City Roanoke	State Virginia	ZIP :		Country USA		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SECOND INVENTOR:	SECOND INVENTOR:  A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Sean		Family Name or Surname McGinnis				
Inventor's Signature			Date			
Residence: City Roanoke	State Virginia	Coun	try USA	Citizenship USA		
Mailing Address 4609 Buck Run Court Apt. H						
City Roanoke	State Virginia	ZIP 2		Country USA		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF THIRD INVENTOR:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) William		Family Name or Surname	Kokonaski			
Inventor's Signature Date						
Residence: City Gig Harbor	State Washingt	on Coun	try USA	<b>Citizenship</b> USA		
Mailing Address 1807 44th Street Court NW						
City Gig Harbor	State Washingt	on ZIP 9	98335	Country USA		

I hereby declare that all statements me information and belief are believed to that willful false statements and the lill U.S.C. 1001 and that such willful false issued thereon.	be true; and further that se so made are punisha	at these statements we able by fine or imprisor	ere made with the knowledge nment, or both, under 18		
NAME OF FOURTH INVENTOR:	☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Pierre  Family Name or Surname Gerligand					
Inventor's Signature		Date			
Residence: City Salem	State Virginia	Country USA	Citizenship France		
Mailing Address 2111 Mill Lane					
City Salem	State Virginia	<b>ZIP</b> 24153	Country USA		